

Abandonment of Monitoring Well Summary Report

ing	Well	ID)
Ì	ng	ng Well

Submit form within 30 days of well abandonment or within 90 days if included in a site closure, monitoring, or investigation report. In addition, submit copies of the original boring log and well construction diagram for the monitoring well, a site map showing the location of the abandoned monitoring well, and the disposal documentation for wastes generated during the abandonment process. Submit all documentation to: Hawaii Department of Health, Hazard Evaluation and Emergency Response Office, Attention: SDAR, 919 Ala Moana Blvd, Rm. 206, Honolulu Hawaii 96814.

Location Information	Own	er Information	
Facility Name:	Well Owner:		
Facility Address:	Contact Person:		
	Mailing Address:		
Latitude:			
Longitude:	Phone Number:	Fax Number:	
TMK:	Land Owner:		
Location Description:	Contact Person:		
	Mailing Address:		
Monitoring Well Location Map Attached: Y N	Phone Number:	Fax Number:	
Well Construe	tion Information		
Date of Installation:	Casing Material:	Casing Diameter:	
Drilling Company:	Casing Length:	Casing Depth:	
Total Depth:	Screen Material:	Slot Size:	
Depth to Water:	Screen Length:	Screen Depth:	
Was the Well Set in an Aquifer that is a Current or Potential	Annular Material:	Depth:	
Drinking Water Source: Y N	Annular Material:	Depth:	
Boring Log/Well Construction Diagram Attached: Y N	Annular Material:	Depth:	
General Abando	nment Information		
Drilling Firm:	Consulting Firm:		
Contact Person:	Contact Person:		
Mailing Address:	Mailing Address:		
Phone Number: Fax Number:	Phone Number:	Fax Number:	
Well Abandon	nent Information		
Date of Abandonment:	Sealing Material:	Depth:	
Reason for Abandonment:	Volume/Weight/Bags	Mixing Ratio:	
Casing/Screen Removed: Y N	Sealing Material:	Depth:	
If Yes, was annular material removed?: Y N	Volume/Weight/Bags	Mixing Ratio:	
If No, was easing cut off below the surface?: Y N	Method of Sealing Material I	Placement:	
Comments:			
Driller's Signature:	Date:		
Consultant's Signature:	Date:		

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